

3:04cv 1859-B

CO-440 (Rev. 8/01) Summons in a Civil Action

B
ORIGIN

RETURN OF SERVICE

Service of the Summons and complaint was made by me ⁽¹⁾	DATE 9-1-04
NAME OF SERVER (PRINT) Amy Medina	TITLE
Check one box below to indicate appropriate method of service	
<input type="checkbox"/> Served personally upon the defendant. Place where served: _____	
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: _____	
<input type="checkbox"/> Returned unexecuted: _____	
<input checked="" type="checkbox"/> Other (specify): <u>certified mail return receipt requested 7003 1680 0000 7067 2094</u>	

U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
OCT 14 2004
CLERK, U.S. DISTRICT COURT
By _____ Deputy

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES 25.00	TOTAL 25.00
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DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on 9-1-04
Date

Amy Medina
Signature of Server

6801 Jannypson Dr. #232 Waco TX 76785
Address of Server

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Ashcraft
Dept of Justice
10th Street & Constitution Ave NW
Washington, DC 20530

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
X ☐ Agent ☐ Addressee
- B. Received by (Printed Name) Amy Medina C. Date of Delivery SEP 07 2004
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

(1) As to who may see

2. Article Number
(Transfer from service label)

7003 1680 0000 7067 2094